PTO/SB/05 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

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| UTILITY |
|--------------------|
| PATENT APPLICATION |
| TRANSMITTAL |

| Attorney Docket No. | 2931 |
|---------------------|---|
| First Inventor | Arlan James Reschke, et al. |
| Title | Electrosurgical Pencil With Improved Controls |
| | ET 710020916 LIS |

| (Only for i | new nonprovisional applications under 37 CFR 1.53(b)) | Express Mail Label No. | ET 710029816 US | | | | | |
|---|---|---|--|------------------------|--|--|--|--|
| See MPEP | APPLICATION ELEMENTS chapter 600 concerning utility patent application contents. | ADDRESS TO: | Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22313-1450 | . (1 | | | | |
| (Submi 2. Applic See 3' 3. Specific (preferin - Desci - Cross - State - Refer or a c - Backe - Brief - Brief - Detail - Claim | ransmittal Form (e.g., PTO/SB/17) it an original and a duplicate for fee processing) ant claims small entity status. 7 CFR 1.27. ication [Total Pages 34] red arrangement set forth below) riptive title of the invention s Reference to Related Applications ment Regarding Fed sponsored R & D rence to sequence listing, a table, computer program listing appendix ground of the Invention Summary of the Invention Description of the Drawings (if filed) led Description (is) act of the Disclosure | Computer Progr 8. Nucleotide and/or Ar (if applicable, all nece a. Computer b. Specificati i. CD-f ii. Pape c. Statement | nino Acid Sequence Submissionssary) Reader Form (CRF) on Sequence Listing on: ROM or CD-R (2 copies); or | ppies | | | | |
| 4. Drawii 5. Oath or Dec a. Ne b. Co (for | ng(s) (35 U.S.C. 113) [Total Sheets 9] | 10. 37 CFR 3.73(t (when there is English Transl 12. Information Di Statement (ID: 13. Preliminary An Return Receip (Should be specified Copy (if foreign prior Nonpublication | an assignee) Attorner ation Document (if applicable) sclosure Copies S)/PTO-1499 Citation nendment to Postcard (MPEP 503) ecifically itemized) of Priority Document(s) ity is claimed) Request under 35 U.S.C. 122 plicant must attach form PTO/S | of IDS of IDS ns | | | | |
| | NUING APPLICATION, check appropriate box, and sup, llowing the title, or in an Application Data Sheet under 3: | | below and in the first sentence | ∍ of the | | | | |
| Continuation Continuation-in-part (CIP) of prior application No.: | | | | | | | | |
| Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) OR Correspondence address below | | | | | | | | |
| Name | Douglas E. Denninger, Esq. | | | | | | | |
| Address | U.S. Surgical A Division of Tyco Healthcare Group J.P. | | | | | | | |
| City | Norwalk | State Connecticut | Zip Code 068 | 256 | | | | |
| Country | | elephone 203-845-48 | . 000 | -845-4266 | | | | |
| Name (Print/Ty | | 200-040-40 | | -040-4200 | | | | |
| Signature | Douglas L. Delillinger | Registration No. (Attorney | V / 01,702 | / 30 03 | | | | |
| Gigirature | (l. leng | | Date // | 1.20.03 | | | | |
| h | CERTIFICATION UN | IDER 37 C.F.R. § 1.10 | | | | | | |

I hereby certify that this correspondence and the documents referred to assence are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number ET 710029816 US

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Dated: (1/20/03

PTO/SB/17 (10-02)
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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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| ותו | 300. | ·vv |

| Complete if Known | | | | |
|----------------------|-----------------------------|--|--|--|
| Application Number | To Be Assigned | | | |
| Filing Date | Concurrently Herewith | | | |
| First Named Inventor | Arlan James Reschke, et al. | | | |
| Examiner Name | Unassigned | | | |
| Art Unit | Unassigned | | | |
| Attorney Docket No. | 2931 | | | |

| METHOD OF PAYMEN | IT (check all that apply) | FEE CALCULATION (continued) | | | | | |
|--|--|-----------------------------|---------------------|-------------|---------------|--|----------|
| Check Credit card Money Other None | | 3. ADDITIONAL FEES | | | | | |
| Deposit Account: | | <u>Large</u> | Entity | Smal | Entity | <i>!</i> | |
| Deposit | | Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | For Doid |
| Account 21-0550 | | 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | Fee Paid |
| Deposit | rgical | 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or | |
| Name United States Sur | giodi | 1053 | 130 | 1053 | 120 | cover sheet Non-English specification | |
| The Commissioner is authorized to | | | 2,520 | | 2,520 | For filing a request for ex parte reexamination | |
| Charge fee(s) indicated below | Credit any overpayments | 1904 | • | 1 | 920* | Requesting publication of SIR prior to | |
| Charge any additional fee(s) during | ng the pendency of this application | 1004 | 920 | 1004 | 920 | Examiner action | |
| Charge fee(s) indicated below, ex to the above-identified deposit accour | • | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| FEE CALCU | | 1251 | 110 | 2251 | 55 | Extension for reply within first month | |
| 1. BASIC FILING FEE | JEATION | 1252 | 400 | 2252 | 200 | Extension for reply within second month | |
| Large Entity Small Entity | | 1253 | 920 | 2253 | 460 | Extension for reply within third month | |
| Fee Fee Fee Fee De Code (\$) Code (\$) | escription Fee Paid | 1254 | 1,440 | 2254 | 720 | Extension for reply within fourth month | |
| 117 | y filing fee | 1255 | 1,960 | 2255 | 980 | Extension for reply within fifth month | |
| l i | gn filing fee 750.00 | 1401 | 320 | 2401 | 160 | Notice of Appeal | |
| 1003 510 2003 255 Plant | t filing fee | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal | |
| 1004 740 2004 370 Reiss | sue filing fee | 1403 | 280 | 2403 | 140 | Request for oral hearing | |
| 1005 160 2005 80 Provi | isional filing fee | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | |
| SUBTO | OTAL (1) (\$)750.00 | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | 1453 | 1,280 | 2453 | 640 | Petition to revive - unintentional | |
| 2. EXTRA CLAIM FEES FOR | Fee from | 1501 | 1,280 | 2501 | 640 | Utility issue fee (or reissue) | |
| | Claims below Fee Paid | 1502 | 460 | 2502 | 230 | Design issue fee | |
| Total Claims 32 -20** = 1 | | 1503 | 620 | 2503 | 310 | Plant issue fee | |
| Claims 2 - 3** = 0 Multiple Dependent | x 84.00 = 0 | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | L |
| | L] = | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | |
| Large Entity Small Entity Fee Fee Fee Fee Fe | ee Description | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| Code (\$) Code (\$) | | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | |
| 100 | ms in excess of 20 pendent claims in excess of 3 | 1809 | 740 | 2809 | 370 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| | tiple dependent claim, if not paid | 1810 | 740 | 2810 | 370 | For each additional invention to be | |
| | eissue independent claims | | | | | examined (37 CFR 1.129(b)) | |
| | ver original patent | 1801 | 740 | 2801 | | Request for Continued Examination (RCE) | |
| | eissue claims in excess of 20 nd over original patent | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | |
| SUBTOTAL (2) (\$) 216.00 | | | Other fee (specify) | | | | |
| **or number previously paid, if great | | *Redu | iced by | Basic | Filing F | ee Paid SUBTOTAL (3) (\$)0.00 | |

| SUBMITTED BY | | | | (Complete | (if applicable) | |
|--|----------|-----------------------------------|--------|------------------------|-----------------|--|
| Name (Print/Type) Douglas E. Denninger | | Registration No. (Attorney/Agent) | 31,752 | Telephone 203-845-4286 | | |
| Signature | (O- Jenn | | | Date | 11.20.03 | |

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Docket: 2931

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Arlan James Reschke, et al.

Examiner:

To Be Assigned

Group Art Unit: To Be Assigned

Serial No:

To Be Assigned

Filed: Concurrently Herewith

For:

ELECTROSURGICAL PENCIL WITH IMPROVED

CONTROLS

CERTIFICATE OF EXPRESS MAILING

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Date of Deposit: November 20, 2003

I hereby certify that the following:

- [x] This Certificate of Express Mailing
- [x] Utility Patent Application Transmittal
- [x] Fee Transmittal
- [x] A patent application consisting of <u>34</u> pages
 - of abstract, specification and claims
- [x] 9 sheets of [x] formal [] informal drawings
- [x] Return postcard

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Vanessa M. Rosado

United States Surgical, a division of TYCO HEALTHCARE GROUP LP 150 Glover Avenue Norwalk, CT 06856 (203) 845-1172